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ABSTRACT

It is imperative that effective preparation and training strategies for future early childhood personnel, teachers, social workers, and health practitioners be established so that low-income, high-risk, multiproblem families can be adequately served. Effective programs and services for such families are family-centered, neighborhood-based, multidisciplinary, empowering, preventive, comprehensive, wholistic, sequential, integrative, and culturally relevant. Such programs and services are nonconventional and nontraditional, and instruction about them is not offered in institutions of higher learning. As part of the effort to bring about the provision of appropriate education of personnel in training, family support programs that offer comprehensive neighborhood-based, family-centered services can serve as laboratory schools and learning centers for training and retraining practitioners. An example of the laboratory school approach is the Avance Family Support Program, which has trained individuals to use effective strategies for serving low-income, high-risk Hispanic families. (RH)

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Preparation and Professional Development Programs for Early Childhood Educators: Emerging Needs for the Next Decade

by

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It is imperative that effective preparation and training strategies for future early childhood personnel, teachers, social workers and health practitioners be established to adequately serve low-income high-risk multiproblem families.

Programs and services that have been found to effectively support low-income high-risk families are characterized as being family-centered, neighborhood-based, multidisciplinary, empowering and utilizing an approach that is preventive, comprehensive, wholistic, sequential, integrative, and culturally relevant. The programs create a warm, encouraging, and caring atmosphere where the parents are treated with respect and dignity. This climate affects the "soul" and "spirit" of the person and is the catalyst that sets the wheel in motion. The parents become receptive to the services, which include the promotion, enhancement

and strengthening of information and support which improves parental knowledge, skills, attitudes and self-esteem and personal empowerment. The parents get to the point where they feel confident, capable and competent to make decisions and to take action. They become motivated to continue to utilize available resources to meet child/parent/family needs and desires which eventually lead to changing and improving child/family and community functioning.

These approaches and practices are nonconventional, nontraditional and are not being taught in institutions of higher learning to future educators, social workers and health practitioners. Consequently, traditional services are not able to reach and effectively serve this population.

Traditional service delivery approaches have been child-centered, where the child is separated from the family and the environment in which he lives. A child is part of a family that is responsible for meeting his needs. The family is embedded in a social, educational, cultural and economic environment that affects child rearing practices, attitudes, values, child development and child and parent functioning. Therefore, any early childhood program must include supportive services to the parents and family members with an attempt to improve the quality of the child's environment and the enhancement of child, parent and family functioning.

Conventional practices in service delivery to families emphasize treating the symptoms rather than preventing the problems; are concerned over the number of people served and on the cost per unit rather than on responding to family/individual needs and on achieving desirable outcome measures. The funding tends to be categorical rather than allowing the pooling of adequate resources to provide an integration of services. Individuals from different disciplines do no communicate or cooperate to facilitate coordination and enhancement of services. Therefore, services tend to be fragmented, band-aid approaches which are insufficient (too-little, too-late).

Health, mental health, education, and social services do exist for low-income high-risk families. However, many families either do not know about the services or they are inaccessible. If the services are familiar to the parents, many refuse to utilize them because they tend to be bureaucratic, threatening and demeaning.

New practices need to be established if we want low-income high-risk children to grow up to become healthy, competent, productive and contributing members of society. Practitioners and service providers need to be trained not solely to create a stimulating, multicultural/multilingual, enriching quality child care setting for the children. They must be trained to be "family advocates". It is through a team of resource individuals or "family advocates" that hard-to-reach parents can become receptive to a

comprehensive, coordinated array of services. These advocates must be extremely sensitive and caring individuals who can relate to the culture, and to the problems that the family is experiencing. Lay individuals from the same neighborhood, who have been through the program, who are assisted in furthering their education and provided with on-going inservice training and supervision are very effective as providers of services to other parents from the same neighborhood.

Those current family support programs providing comprehensive neighborhood-based, family-centered services can serve as "lab schools" and learning centers for training and retraining of practitioners. The Avance Family Support Program has received a grant to establish the Avance/Hasbro National Family Resource Center. It has been serving as a "lab school" to train individuals from throughout the nation to lealrn effective strategies in serving low-income high-risk Hispanic families. Individuals, representing various disciplines attend a 2 1/2 day institute where they are exposed to the Avance philosophy, the program components, the curriculum, information on fiscal, evaluation, management, organization and MIS reporting. Staff personnel and participants serve as faculty members. Depending on their interest, certain aspects are emphasized, (i.e., fatherhood project, early childhood day care services, the comprehensive community-based model, the school-based model, research and evaluation studies, and MIS record keeping and

the Hispanic culture. Follow-up on-site visits are available, also. Through the lab school, Avance has been able to train individuals to better serve low-income high-risk individuals, including Hispanic families, to initiate and expand the Avance model at numerous sites throughout the nation. The individuals who have attended our institutes are highly motivated, committed individuals who were searching for a better solution to create change and to make a difference. The seeds of seventeen years of experience are being spread to other early childhood education and care personnel to improve and expand the quality of services to families in need.